## CONFIDENTIAL

STATE OF CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE FVQC--STANDARDIZATION

## 40.11.01 SEND MONTHLY REMITTANCE [PAYABLE TO CASHIER] AND THIS FORM TO:

Cashier Department of Food and Agriculture 1220 N Street, P.O. Box 942872 Sacramento, CA 94271-2872

## Fruit and Vegetable Shipper Monthly Remittance Report/Registration

51-055A (Rev. 07/06)							
COMPANY NAME	REGISTRATION NUMBER						
P.O. BOX/STREET ADDRESS				AREA CODE AND TELEPHONE NUMBER  DUE DATE: Submit on the last day of the reporting Month (See # 7 on the reverse side of this form for penalty information)			
CITY, STATE, AND ZIP CODE							
☐ Check this box if any of the above information has	changed						
(1) Commodity	(2) # of Containers Shipped (@ \$0.001)	(3) # of Containers Shipped (@ \$0.003)	(4)* # of Containers Valencia Oranges Shipped (@ \$0.0045)	(5)** # of Containers Navel Oranges Shipped (@ \$0.009)	(6)*** # of Containers Lemons Shipped (@ \$0.004)	(7)**** # of Containers Mandarin Citrus Shipped (@ \$0.0045)	(8) Assessment Amount
SUBTOTAL							
NOTE: If there are no shipments to report, this form					PENALTY		
indicating "No Shipments Made" or "Nothing to Repo	TOTAL						
Last report for the season. Will begin reporting again in							
<ul> <li>Valencia oranges are subject to a total assessment of \$.004</li> <li>Navel oranges are subject to a total assessment of \$.009 pr</li> <li>Lemons are subject to a total assessment of \$.004 per con</li> <li>Mandarin Citrus is subject to a total assessment of \$.0045</li> </ul>	er container (\$.001 Standardization tainer (\$.003 Standardization ass	on assessment + \$.006 Navel a sessment +\$.001 Crop Estimation	ssessment + \$.002 Crop Estima on Program				

I hereby certify that to the best of my knowledge and belief, this report is true and complete. I understand that records from which this report were compiled are subject to audit by the Department of Food and Agriculture per Section 42808 (a) (3) of the California Food and Agricultural Code.

REPORTING MONTH	PRINT NAME OF PERSON COMPLETING REPORT	SIGNATURE	DATE

FOR INSTRUCTIONS--SEE REVERSE SIDE